

CALIFORNIA MEDICAL ASSOCIATION

This department contains official notices, reports of county society proceedings and other information having to do with the State Association and its component county societies. The copy for the department is submitted by the State Association Secretary, to whom communications for this department should be sent. Rosters of State Association officers and committees and of component county societies and affiliated organizations, are printed in the front advertising section on pages 2, 4 and 6.

CALIFORNIA MEDICAL ASSOCIATION

EDWARD M. PALLETTE President
HOWARD MORROW President-Elect
W. W. ROBLEE Speaker
MORTON R. GIBBONS Council Chairman
FREDERICK C. WARNSHUIS Secretary-Treasurer

THIS MONTH'S TOPICS*

ASSOCIATION ACTIVITIES

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3. *Medical Legislation.*
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ASSOCIATION ACTIVITIES

AMERICAN MEDICAL ASSOCIATION FELLOWSHIP

At the beginning of a new year it is timely to once more urge members to make application for fellowship in the American Medical Association. Our national organization performs a very tremendous amount of service for the profession as a whole as well as for every member. This service is related to national legislative matters and our relationship to the public and public activities related to health welfare and medical service.

There are twelve bureaus and councils with full-time directors or secretaries, located in the headquarters building in Chicago, and they, with the general officers and some seven hundred employees, are continuously and persistently engaged in work that concerns every doctor of medicine. Without that service our profession could not maintain the position and standing that we now hold. Without that service and alertness we would be the pawns of designing propagandists and those who are inspired by selfish and ulterior motives and quests. Our national association renders a very distinct and personal service to every doctor of medicine. It merits the support of every practitioner. That support is subscribed by becoming a Fellow of the American Medical Association. Are you rendering that support?

To become a Fellow you must make a special application through your State Secretary. Your membership in your county and state association does not carry or automatically convey to you American Medical Association Fellowship. Special application must be made as indicated above. Send in for an application blank today.

The annual fellowship dues are \$7. In return for these dues, you receive the benefits of representation and, in addition, the weekly issue of the *Journal of the American Medical Association*. Valuable as this journal has been, it is going to become more valuable by reason of a new department or section on medical economics that was added at the beginning of January. This new section will present information related to the Security program, federal legislation, and social movements—questions that are

receiving widespread attention in Washington and in every state.

Hence, the recommendation that you apply for fellowship and lend support to these activities that are so vital to your future.

WHO KNOWS BETTER?

An institution's medical director was conducting a few visitors through his sanitarium for mental cases. He paused before one patient, and asked: "John, why do you insist on scratching yourself?" "Because," the patient replied, "I'm the only person in the whole world who knows where I'm itching."

The medical profession alone knows what is best for the health needs of the public and what measures will sustain and provide adequate medical care on a quality basis consistent with scientific practices. While we know this to be true the public and legislators are not so minded, and as a result these lay groups and propagandists join with the politician in a nation-wide movement to create a new system for the providing of medical care and are ignorant of basic facts and conditions.

It is incumbent upon all of our members to educate these new deal proponents singly and collectively.

MEDICAL LEGISLATION

Elsewhere in this issue will be found the first "Legislature Flashes," transmitting information related to the bills that have been introduced in the present session of the legislature in so far as they relate to health and medical care. No attempt is made to dissect them or to indicate their apparent or hidden purposes. This will be done through other channels. These "Flashes" should indicate public and political trend. After all, the question of so-called state medicine, informed persons assert, will not be decided by the medical profession. The public will make the decision through its legislative representatives. Or rather, an organized minority of the public joining with an organized minority of politicians will write the ticket. That is the history of all new movements and new legislation.

The rôle played by medicine will be determined by how strong an organized group it can mobilize to shape, guide, and control the efforts and influence of the proponents for state-provided medical care. There rests the answer as to what medical legislation will be enacted during the next four or five months. Radical, ill advised, undesirable legislation to provide medical care under state or federal control can be defeated only by organizational influence and will depend upon the personal interest and work of every member. Therefore members should evidence constant interest in their county societies and unite in its representations.

LEGISLATURE FLASHES

On going to press (January 20) the "bill hoppers" of the legislature are crammed, the printing bureau is swamped, and the end is not discernible. The legislature adjourns January 22 for the customary thirty-day interval. More bills may then be introduced by general consent.

It has been impossible to obtain copies of bills relating to health and medical care because the printing department of the legislature is unable to keep up with the introduction barrage. Advance information gives the following as some of the bills that have been introduced:

Narcotic regulations.

Ten skeleton bills amending the Medical Practice Act.

X-ray Laboratory Bill.

*All articles listed under this caption, "This Month's Topics," have been written and sent to the Editor by the Association Secretary, Dr. Frederick C. Warnshuis.

Farm Bureau County Hospital Bill.
Medical Service and Hospital Bill (Senator Williams).
Venereal disease control.
Hospital Insurance Bill.
Medical Care Insurance Bill.
Dental Bill.

All these comprise legislation that directly affect medical care and practice. Our Committee on Public Policy and Legislation is intensely engaged in its work, and is giving most thoughtful attention to legislative matters.

It is well to remind members and county societies that no action for or against any legislative enactments should be registered until our committee or the Council outlines attitude and position. In due time and course a digest will be sent to every county society with instructions as to action. Await those instructions, but be prepared to respond when word reaches you through your county officers.

THIS IS THE LAW!

Eighteenth—The certificate issued herein for the practice of midwifery may be revoked for the failure to have the following equipment (in each case): Nail brush; wooden or bone nail cleaner; jar of green or soft castile soap; rubber gloves; tube of sterile vaseline; clinical thermometer; agate or glass douche reservoir; two rounded vaginal douche nozzles; two rectal nozzles, large and small; one soft rubber catheter; blunt scissors for cutting cord; either lysol, carbolic acid, or bichloride of mercury tablets; boric acid powder; one per cent solution of nitrate of silver; medicine dropper; narrow tape or soft twine for tying cord; absorbent cotton (preferably in one-quarter pound packages); no other instruments are to be used by a midwife. [Amended 1915, p. 184; amended 1917, p. 93; amended 1921, p. 1009; amended 1925, p. 281; amended 1927, p. 99; amended 1929, p. 626.]

Queries: Why agate or glass reservoirs? Why rounded tips? How does the fluid in the reservoir pass to the tips? As some member said: "A resident interne or nurse would be tossed out on their ear if they attempted to douche a woman in labor or after labor has terminated." Who had an overstock of quarter-pound packages of cotton?

Yes, this is the law of today! Surely, its framers of yesteryears (1927 and 1929) were meticulous in drafting an inventory for the midwives' obstetrical bag.

ENDOWMENTS

A doctor of another state, in providing for a \$50,000 endowment fund contribution to his state medical association, wrote:

"What I am endeavoring to do is to create an unending service to the medical profession and through them a better service to the sick. A man who serves only while he lives, serves only for a very short period. I would like for my services—existing in some form—to go on indefinitely after my physical being has ceased to exist."

What a noble thought and deed! We trust that those of our members who are able will emulate that ideal and purpose, and provide that their services may go on indefinitely in our Association.

A SOUTHERN TREK

At 5 p. m. on Tuesday, January 6, President Palette and your Secretary set forth in an unusual rainstorm from Los Angeles for Santa Ana, where Councilor Emmons was met, to attend the regular meeting of the Orange County Medical Society. At 8 p. m., in spite of the rain, some one hundred members of the county society convened. Addresses were made by the State Association officers, and until 10:45 p. m. a general discussion, with questions and answers, dealt with national, state, and local problems that were related to medical care, practice, public health, and social-economic problems vital to our members.

Orange County members constitute one of our most active county units. They reflect in a most satisfactory way that which can be accomplished by unity of purpose and action. They are meeting in a most admirable way all of the medical and public-health questions that concern their community and are rendering a service that inspires public confidence.

By 12:30 a. m. we were in Los Angeles, and though the rain continued, its discomforts did not dampen the enthusiasm engendered by this county meeting.

On Wednesday your president and secretary went to Riverside, where they were met by Speaker Roblee and Councilor Emmons. At 8 p. m., 108 members of the Riverside and San Bernardino County Societies and ladies sat down to dinner in the Mission Inn. The postprandial program was opened by two vocal and harp selections by local artists, and fixed the harmonious theme of the subsequent addresses and discussions presided over by Speaker Roblee.

The members of these two constituent units also reflected the cohesive unity of our Association, and impressed the State officials with the fact that they are loyal to all of our ideals and policies.

At 9 a. m. on Thursday, January 7, President Palette, Speaker Roblee, Councilor Emmons, and the State Secretary set forth for El Centro, in Imperial County. We skip the snow on orange trees and blossoming roses in Redlands and the hunger urges of the back-seat riders. These cries and pleas were silenced in the lunch room of the Barbara Worth Hotel in El Centro at 2 p. m. Following this a run was made into Mexicali, where in Mexican environment we meditated upon the very apparent difference in the living conditions and customs of the natives. The Speaker terminated the visit by speeding us back to El Centro to the tunes of guitar-strumming street urchins.

At 7 p. m. thirty-four members of the Imperial County Society convened for their monthly meeting. A fine group of men and a 100 per cent society, having all eligible physicians as members. Their treasury has a sufficient balance to pay the 1937 State dues, so no assessment is being made on the members for this year.

On Friday morning, through icy roads, and snow, strange as that does seem, we began our return trip, leaving Doctors Roblee and Emmons at Riverside, and President Palette was left in Los Angeles in time for late afternoon office hours. Your Secretary continued on to Santa Barbara.

On Saturday, January 9, the Scientific Program Committee and the officers of all scientific sections met for the purpose of reviewing and approving the program for the Del Monte meeting. Suffice it to state at this time that the 1937 scientific program will be most attractive and will impel a large attendance. Detailed announcements will appear in subsequent issues. Sunday, January 10, return drive was made to San Francisco.

Would that every member could visit all of our county units. He would become deeply impressed with these fellow members. He would gain a pride and feel an increased appreciation for his organizational affiliation.

COUNCIL MINUTES

Minutes of the Two Hundred and Forty-Ninth Meeting of the Council of the California Medical Association

Pursuant to the call of the Chairman, the Council of the California Medical Association convened in special session in the Sir Francis Drake Hotel, San Francisco, on Saturday, January 16, 1937, at 9:30 a. m.

1. Roll Call.—The meeting was called to order by the Chairman, with the following members present:

President Edward M. Palette, Speaker William W. Roblee, Chairman Morton R. Gibbons, Councilors Karl L. Schaupp, Calvert L. Emmons, Carl R. Howson, Henry J. Ullmann, Axel E. Anderson, Alfred L. Phillips, C. E. Schoff, Henry S. Rogers, William H. Kiger, J. B. Harris, C. O. Tanner, T. Henshaw Kelly; Chairman of Public Relations Committee Charles A. Dukes, Editor George H. Kress, Secretary F. C. Warnshuis, General Counsel Hartley F. Peart and his associate, Howard Hassard.

Mr. Lionel Browne was present during the discussion of the report of the Committee of Five. Honorable Walter McGovern and Honorable Melvin I. Cronin addressed the Council.

Absent: President-Elect Morrow (on account of illness) and Councilors Hamlin and Wilson.

2. Scientific Committee Report.—A report of the meeting of the Committee on Scientific Work, held on January 9 at Santa Barbara, was given by the Secretary.

It was moved by President Pallette, seconded by Councilor Rogers, that, in accordance with the recommendation of the Committee on Scientific Work, the third general meeting be devoted to a discussion of health and hospital insurance. Carried.

3. Papers for Publication in Journal.—After discussion of the advisability of publication of a paper submitted for publication in the JOURNAL, it was moved by President Pallette, seconded by Councilor Rogers, that the paper as presented be published. Carried.

After consideration of the paper "Practice of Medical Problems in Hospitals," the Council agreed that there would be no objection to its publication in the JOURNAL under the names of the authors.

4. Exchanges.—Members in the southern part of the State, in an endeavor to build up the Reference Library of the Los Angeles County Medical Association, requested the Council to give consideration to obtaining two exchange copies of medical journals.

It was moved by Editor Kress, seconded by Speaker Roblee, that editors of state medical journals be requested to grant duplicate copies of their journal in exchange for two copies of CALIFORNIA AND WESTERN MEDICINE, one copy of the exchange journals to be sent to the San Francisco County Medical Society Library and one copy to be sent to the Los Angeles County Medical Association Library. Carried.

5. California Medical Economic Survey.—Deputy Attorney-General Lionel H. Browne, representing the State Board of Health, cosponsors of the California Medical Economic Survey, gave a résumé of the terms and conditions under which the survey had been conducted and the responsibilities of the State Board of Health and the California Medical Association. Deputy Attorney-General Browne read the resolutions relating to the survey adopted by the Board of Health at a special meeting thereof.

It was moved by Chairman of Public Relations Committee Dukes, seconded by Councilor Rogers, that the Council of the California Medical Association approve the resolutions adopted by the State Board of Health. Carried.

6. Legislation.—Junius B. Harris, Chairman of the Committee on Public Policy and Legislation, gave a résumé of the present legislative activities and informed the Council of the committees appointed by the Senate and Assembly having to do with public health and medical practice.

The Secretary presented correspondence from Doctor Russel V. Lee of Palo Alto, together with proposed law for the control of venereal diseases. After full discussion, on motion of Editor Kress, seconded by Councilor Kiger, the following resolution was adopted:

WHEREAS, The federal, state, and local public health agencies have authorized and are putting into operation carefully prepared plans for a campaign for the prevention and treatment of syphilis and gonorrhea; and

WHEREAS, The utilization of federal funds in this work necessitates centralization of state procedures in and through the California State Board of Health; now therefore be it

Resolved, By the Council of the California Medical Association that it is in full sympathy with all rational and practical efforts to solve the problem of syphilis and gonorrhea; and be it further

Resolved, That this Council suggests that all groups and citizens who wish to cooperate in the work, do so in conjunction with the State Board of Health.

It was moved by Councilor Kelly, seconded by Councilor Ullmann, that the Council commends the San Francisco *Daily News* for its attitude toward the present campaign and publication of articles dealing with venereal diseases. Carried.

It was the consensus of opinion that the Code Commission's revision of the medical practice laws should be handled by the Secretary of the Board of Medical Examiners.

7. Legal Counsel.—The General Counsel reported on the complaint filed by a taxpayer in Kern County against the Board of Supervisors regarding the building of a branch hospital at Delano; and contempt proceedings about to be filed against the Supervisors for violation of the injunction in the case of *Goodall vs. Brite*. Mr. Peart

also reported on proposed amendments to the county hospital bill, definition of indigency, amendments on county hospital legislation.

8. Public Health and Welfare.—The Secretary presented correspondence from the American Medical Association and resolution from the Illinois State Medical Society regarding the United States Public Health Service. No action was taken pending the establishment of policies by the American Medical Association, and the entire matter was referred to the Executive Committee.

President Pallette called to the attention of the Council two statements which will appear in the January 16 issue of the *Journal of the American Medical Association* regarding health welfare and cooperation with State and local agencies. The formulation of a policy was referred to the Executive Committee.

9. Hospital Insurance.—Discussion was had of the extension of the Intercoast Hospitalization Association and the rider attached to the policy of that Association.

It was moved by President Pallette, seconded by Speaker Roblee, that the entire matter of the Intercoast Hospitalization Association be referred to the next meeting of the Council and that in the meantime the Secretary and the Chairman of the Executive Committee contact the president and other officers of the Intercoast Hospitalization Insurance Association and secure definite information. Carried.

10. Retired Memberships.—In accordance with provisions of the by-laws, the Secretary presented retired membership data signed by the respective county medical societies.

It was moved by Councilor Schaupp, seconded by Councilor Ullmann, that Charles D. Ball, M. D., member of the Orange County Medical Society, be granted retired membership in the California Medical Association. Carried.

It was moved by President Pallette, seconded by Speaker Roblee, that Charles G. Levison, M. D., member of the San Francisco County Medical Society, be granted retired membership in the California Medical Association. Carried.

It was moved by Chairman of Public Relations Committee Dukes, seconded by Councilor Schaupp, that Cullen F. Welty, M. D., member of the San Francisco County Medical Society, be granted retired membership in the California Medical Association. Carried.

11. Noon Recess.—At this point a recess was taken for luncheon with the Legislative Committee of the two State Dental Associations.

12. Call to Order.—The meeting was called to order after the noon recess, with the following members present: Doctors Pallette, Roblee, Gibbons, Schaupp, Emmons, Howson, Ullmann, Anderson, Phillips, Schoff, Rogers, Kiger, Harris, Tanner, Kelly, Dukes, Kress, Warnshuis, and Mr. Peart and Mr. Hassard.

13. Hospital and/or Medical Insurance.—T. Henshaw Kelly, Chairman of the Committee on Hospital and/or Medical Insurance, presented the proposed act covering medical service association for discussion by the Council. The bill was considered section by section and certain amendments made.

It was moved by Chairman of Public Relations Committee Dukes, seconded by Councilor Rogers, that the bill as amended be approved and that the Legislative Committee proceed to have it introduced forthwith.

A roll call vote was then taken and the motion was unanimously adopted.

Doctor Harris called the attention of the Council to the medical service bill introduced at the present session of the Legislature by Senator Dan Williams. It was the sense of the Council that this bill should be discussed at the Annual Conference of County Secretaries.

William H. Kiger, member of the Special Committee on Hospital Service Insurance, outlined the activities of the hospitals in the southern part of California and asked Doctor Kress to read the bill to govern hospital insurance as proposed by the southern hospitals.

The bill was read and discussed, and on motion of Councilor Schaupp, seconded by Councilor Phillips, the bill on hospital insurance as presented was approved, and Doctor Kiger was authorized to arrange for its introduction at his discretion. Carried.

14. **X-Ray Legislation.**—The x-ray bill as presented by the Pacific Roentgen Club was referred to the Legislative Committee for report at the February 7 meeting of the Council. Carried.

15. **Adjournment.**—There being no further business to come before the Council, adjournment was taken at 5:50 p. m.

MORTON R. GIBBONS, *Chairman.*
F. C. WARNSHUIS, *Secretary.*

C. M. A. DEPARTMENT OF PUBLIC RELATIONS†

California Code Commission: Recodification of the Medical Practice Laws

A former legislature created a Code Commission for the purpose of rewriting and codifying existent laws.

When one reads some of the laws as they were drafted and passed, wonderment grows as to verbiage, verbosity, and interpretation. Why confusion results is easy to explain. Why attorneys, and even courts, arrive at differing conclusions is not hard to understand. But what else could be expected in view of the process that governs legislation procedure. To correct these errors, to clarify meaning and to correct errors in grammar, this Code Commission was created.

The Code Commission has been engaged in its task for several months. It has been very considerate in inviting interested groups to review its redrafts. After it had rewritten the medical practice law the Commission invited our Association to confer with a representative of the Commission and give advice and express opinion in order that the original intent and meaning of each section might not be altered.

The Council appointed a special committee, as did also the Board of Medical Examiners. These two committees and a representative of the Commission met and spent some twenty hours in checking every line and word of the redraft with the original law and completed the revision of this law. It is believed that it is now in a form that will be readily understood and interpreted. There was no authority to make any changes in basic provisions or intent or to include any amendments. Clarification was the sole objective. Verbosity was eliminated and grammatical construction was improved.

The Legislature will now approve this redraft, thereby placing in our statute code a well-constructed law. The following members rendered this service: Doctors J. B. Harris, M. R. Gibbons, Sr., Howard Morrow, T. Henshaw Kelly, State Secretary, Mr. Hartley Peart and his associate, Howard Hassard, for the Association, and Doctors C. E. Schoff, C. L. Abbott, C. B. Pinkham, and Mr. Lionel Browne for the Board of Medical Examiners.

Automobile Versus Airplane Deaths

An airliner with twelve passengers crashed and twelve deaths result. Extra newspapers, radio bulletins, three investigations, and congressmen gaining publicity through promises of introducing bills to create other investigations and useless laws. Papers blazing with many point-size headlines dealing with this unfortunate "crash," in a sixth or seventh page column item in small type report 1,061 deaths on the streets in one city caused by automobiles. Yet no comment follows on this slaughter on streets and highways.

Airplane travel is safe. It is safe from a mechanical standpoint because these plane accidents do not result from mechanical or plane failure. Plane travel is safe from the physical fitness of pilots' standpoint because

competent medical advisers and examiners have formulated physical standards for pilots. Airplane travel has a danger factor from an operating standpoint because operating officials are neglecting two important factors—judgment failure and weather conditions.

Judgment failure or man failure looms up when dispatchers and pilots ignore the elements, think they can ride through and delay in making emergency landings, or issuing grounding orders. Judgment man failure also occurs when the pilot runs into a blind spot, loses his course and bearings and continues to fly on at an altitude that is lower than the highest ranges on his course. Pilots should be drilled and drilled so that they know the peak altitudes of their terrain and be schooled and schooled that in emergencies or when encountering visibility that is nil that they shall immediately commence climbing to an altitude at least 1,500 feet higher than the highest peak on their course or terrain and maintain that altitude until they regain their bearing and necessary visibility. Observance of this rule will prevent crashes into sides of mountains. Storms and adverse flying conditions are reported on every course. The alert pilot should have courage to turn back or ground rather than to take a chance on riding through. If he does not, the operating dispatcher ought to exercise his authority and either issue orders to turn back or ground the plane in a safe emergency landing field. We have commended one pilot for taking us back and another for making an emergency landing even though we were grounded for four hours. Airplane travel is safe and will be safer when operating officials observe these two emergency rules.

As to the slaughter by automobiles, that will continue until legislators ignore the political pressure and influence of manufacturers and dealers and enact new laws governing automobile driving. What is needed is a law fixing standards of physical fitness that must be met to obtain a driver's license. A paper reporting a plane accident had an item imparting that an automobile driver was receiving a blind man's pension each month. Think of it!—vision so poor as to qualify for a blind person's pension, yet given a license and permitted to drive an automobile!

Another law or amendment is required to give police and patrol officers authority to revoke drivers' licenses of all who violate traffic laws. Leniency has generated disdain for traffic laws and encouraged violations.

Some day public opinion may overcome the mercenary policies of automobile manufacturers and dealers and bring about legislation and enforcement.

SAFER IN AIR THAN ON HIGHWAYS

When one considers that the Sunday night accident to a United Air Lines plane, near Saugus, was the first serious crash in eleven years of the company's operations between San Francisco and Los Angeles, the tragedy is softened somewhat; and the growth of the flying habit among Americans is explained. Over the Coast route, this line has made 20,000 flights, totaling 7,000,000 miles, without a mishap to passengers, in multimotored planes, until this exception occurred.

On the same day, twelve lives were lost in highway traffic in Los Angeles County, with a total of more than one thousand victims for the year.

Thorough investigation was made of the air disaster, and every known remedy will be applied to prevent repetition. If the same degree of preparation and care should be directed to the prevention of motor-car accidents, better progress would be made toward safety on streets and roads.

Perhaps, after all, the greatest factor in continuing the terrific traffic toll is public apathy due to the average individual's smug belief that motoring may be dangerous for other persons, but not for him.—*Long Beach Press-Telegram.*

San Mateo County Society Sets an Example

The following communication reflects a commendable example for all of our county societies. Such contacts with boards of supervisors is bound to be productive of good, better understanding, and mutual satisfaction. Every county medical society should make similar contacts with their supervisors and legislators. We congratulate and

† The complete roster of the Committee on Public Relations is printed on page 2 of the front advertising section of each issue. Dr. Charles A. Dukes of Oakland is the chairman, and Dr. F. C. Warnshuis is the secretary. Component county societies and California Medical Association members are invited to present their problems to the committee. All communications should be sent to the director of the department, Dr. F. C. Warnshuis, Room 2004, Four Fifty Sutter Street, San Francisco.

commend the members of San Mateo County in this well-directed activity. They are discharging a county society function that is quite important.

SAN MATEO COUNTY MEDICAL SOCIETY

December 31, 1936.

To the Honorable Board of Supervisors of San Mateo County, Redwood City, California.

Gentlemen:

Since the recent election there has been a feeling on the part of the members of the San Mateo County Medical Society that our organization should communicate with you gentlemen to transmit our ideas in regard to the County Department of Health and Welfare. Informal discussion with some of your board confirmed our feeling that you might like to hear from us and have our Society form a standing committee which would be ready at any time to cooperate with your board.

It is our opinion that you gentlemen, constituting as you do the first Board of Supervisors elected at large according to the provisions of the county charter, are going to stand for improved governmental conditions in our county. As citizens of the county we, too, want good government, and as physicians who helped to formulate the health and welfare provisions of the charter, we feel vitally interested in these provisions.

As a body of medical men and women who are in almost constant intimate contact with public health and welfare matters, we respectfully submit the following suggestions which we hope will prove of value when the health and welfare provisions of the charter are under consideration by your board. We should like to have it understood at the outset that it is not our desire to criticize anything that has been done in the past. We offer these suggestions exactly as they might have been offered when the charter first went into effect.

The administrative head of the county government is a highly important official whose appointment is entirely in the hands of your board. Under his jurisdiction the county executive has, among other departments, the Department of Health and Welfare, and its efficient operation is dependent upon his administrative ability. The charter calls for the appointment by the executive of an advisory board of health and welfare, whose duties primarily are to aid the executive in selecting a director of public health and welfare, to advise with the executive, the director, and the various department heads in this division. The functions of this board are of great importance, and a good executive will select such a board with careful consideration and, having selected it, will make frequent use of it and discuss freely with its members the policies and operations of the department.

We feel that the position of director of public health and welfare should be filled by a physician who is sufficiently mature in years to have gained experience in dealing with people, that he should have executive ability, that he should be a man who meets with the approval of the physicians of the county, and that he should have some special training and experience in this type of work. The modern trend in medicine is to attempt to have every physician consider himself a volunteer health officer, and to have him working hand in hand with the Public Health Department. It follows that no public health director can efficiently run his department without close cooperation on the part of the physicians in his community.

An important position under the Department of Health and Welfare is that of superintendent of the county hospital. Again it is necessary to have a man who enjoys the confidence of the medical profession. Most of the medical and surgical service at the hospital is rendered gratis by the doctors of the community, which, we feel, results in standards of service higher than they would be if physicians were employed to do the work. Furthermore, this service, if paid for by the county, even at minimum rates, would be a tremendous burden to the taxpayer. Further requisites of the hospital superintendent are that he should be a competent medical man and should possess executive ability. He should run the hospital as economically as possible in keeping with good hospital care.

The Department of Social Service is responsible for the admission of patients to charity service in the hospital and clinics, and for the care of the poor, the blind, etc., in the home. It is not an uncommon practice on the part of certain people to attempt to get free hospital and medical care at the expense of the county even though they could, by no stretch of the imagination, be called indigent. This is an unfair burden on the respectable citizen, who pays taxes to maintain these institutions and who at the same time must provide for his own care and for that of

his family in case of accident or illness. It is also unfair to the doctors who contribute their time and skill in an effort to provide proper care for those who are supposed to be indigent. It is probable that every county in the State of California has at some time, in the course of its history, had county officials who made a practice of repaying political favors by influencing the Social Service Department in such manner that the department would make possible the admission of non-indigents to the county hospital. Obviously, the taxpayer and the doctor pay the bill. Another practice, unfortunately only too common, has been the appointment of political favorites to the positions of investigators in the department. It is the feeling of the County Medical Society that such policies are not consistent with good county government.

The superintendent of social service should be a person who has had wide training and experience in the work. He or she should possess real business ability, and at the same time have enough humanitarianism to treat decently those who are really in need. The superintendent should be free of all political pressure, should be able to appoint his own workers, and should be directly answerable to the director of health for his results.

Referring again to the Department of Public Health, we would like to suggest that a concerted effort be made to bring all of the people of the county under this department by inducing the cities to abolish their local departments and to contract their health work to the county. The county department serves only a relatively small fraction of the population, a condition not consistent with economical administration. If the various city officials have confidence in the County Department of Public Health, they should be glad to eliminate their local departments. We feel that you gentlemen have a unique opportunity to restore confidence in the government of our county and so make possible for unification of public health work under one head, the Director of Public Health and Welfare.

In summary, we feel that we have at present a Board of Supervisors, composed of men of sound business sense. In the administration of county government it is our opinion that where competent executives are placed at the head of the several departments, it is unnecessary for the Board of Supervisors to feel called upon to dictate the policies of, and make appointments in, these departments, maintaining, of course, its power of veto. It would seem that unnecessary confusion would be eliminated and adverse publicity avoided if the board felt sufficient confidence in its department heads to refer the complaints of constituents to the department involved. We feel sure that you gentlemen will agree with us when we say that political patronage is not consistent with good county government.

In this communication our motive has been to lend helpful suggestions. As physicians and fellow taxpayers we are interested, on the one hand, in the efficient operation of our County Health Department and all of its branches, and on the other hand, in the economically sound administration of county government. It is with the hope that we may cooperate with the Board of Supervisors toward these ends that this communication is respectfully submitted.

Very truly yours,

THE SAN MATEO COUNTY MEDICAL SOCIETY.

Objectives of the California Heart Association

The aim of the California Heart Association shall be the better education of both the medical profession and the general public in heart disease and its resultant disability:

Medical Activities

1. Arrange for diagnostic clinics and postgraduate education work in rural areas.
2. Seek representation of cardiac problems on programs of local county medical association meetings.
3. Sponsor two major yearly symposia on heart disease, one in San Francisco and one in Los Angeles.
4. Provide some method by which physicians may obtain postgraduate consultation on individual problems within the limitations of the standards of the American Medical Association and where direct consultation service is not available.
5. Foster a wide membership in state and national heart associations.
6. To accumulate and have available for all physicians in the State the latest proved methods for the handling of cardiac disease.
7. To promote uniform criteria for diagnosis and records among the general profession.
8. To study the etiology of cardiac and circulatory disease by accumulation of data and to act as an authoritative

tive source in dispensing proved scientific knowledge in this field.

9. To foster and guide worth while research in the field of cardiovascular disease.

Public Relation Activities

1. To cooperate with public health departments, school health departments, social and health agencies, and other organized groups in all constructive efforts to present information tending to aid in the cure and prevention of heart disease.

2. To cooperate with industrial and insurance companies relative to the employment, hazards, and liability of persons with circulatory defects.

3. To prepare educational exhibits for presentation to the public.

4. To present approved heart educational material to the general public by means of newspaper releases, radio programs, moving-picture films, news letters, and pamphlets.

General Activities

1. To combat misinformation about heart disease and make every attempt to combat quackery.

2. To consider the provisions made for convalescent cases, not ill enough to require hospital care, but not well enough to work and to foster a rehabilitation program.

3. To attempt to arrange a proper evaluation of the status of the heart in industry and employment.

4. To attempt to arrange the proper evaluation of the insurability of heart disease.

5. To properly evaluate the natural resources of California as applied to the treatment, the care, and the residence of those people afflicted with heart disease, and those other people from other localities who select this state as their place of residence.

6. To investigate and promote all proved methods for the institution of preventive measures in heart and circulatory disease.

Federal Resettlement Administration

This federal agency was formed to grant aid to farmers in drought-stricken areas. The Administration purposes to aid agriculturists to rehabilitate their farms or gain a new location for their agricultural labors. Clients of this Administration are the recipients of loans from the Government.

In the course of its activities this Resettlement Administration has prepared articles of incorporation and by-laws under which, by cooperative methods, the clients can organize for the purpose of providing medical care for themselves and their dependents. Such a corporation has been formed in North Dakota. Now the information at hand indicates that the forming of a similar corporation is contemplated by Mrs. R. B. Maycock, Chief of Home Management Section, and Mr. D. G. Hildebrand, Supervisor of Los Angeles County, and that they have "set out to find some hospital group or clinic that will undertake to provide medical service for clients of the Administration in Los Angeles County.

The articles of incorporation provide, among other things:

To associate its members together for their mutual benefit and to further the rehabilitation of said members and to that end to engage in any activity involving or relating to the obtaining for its members of medical and dental treatment and services and any surgery, nursing or hospitalization, necessary or convenient thereto.

... and to make provision for the payment of and pay bills rendered to its members by physicians and dentists. ...

In North Dakota, physicians are asked to render these services for a fixed fee, and physicians unwilling to cooperate are being listed as "ineligible"—black-listed.

Here, then, is found another plan of bargaining for medical care for federal clients under terms and conditions prescribed by the lay group. At present no approach has been made to accredited representatives of our profession. Probably the "ticket" will be written and then the members of the profession will be asked to underwrite it. How long will it be ere federal and state representatives will learn the wisdom of first consulting with medical representatives before they formulate their plans and procedures for providing medical care?

COMPONENT COUNTY MEDICAL SOCIETIES

SACRAMENTO COUNTY

The regular meeting of the Sacramento Society for Medical Improvement was called to order by the president, Dr. Frank MacDonald, on November 17, 1936, at the Auditorium on Twenty-ninth and L streets. Some seventy-two members and guests were present.

The paper of the evening was given by Dr. W. W. Cross of Oakland, on *A Review of Four Hundred and Seventy Cases of Pyelonephritis*. The speaker stated this disease may occur from the ages of three to seventy-six, and is three times more common in females than males. The commonest organism found, in the order of their frequency, are colon bacilli, staphylococcus, and streptococcus. Pyelonephritis usually occurs in the course of a general infection, so the primary focus must be sought elsewhere. The bacteria may be carried to the kidneys in three ways—by the blood stream, through the lymphatics, or ascending from mucous membranes lower down the tract. Ptosis, strictures, and obstructions of other types may serve as exciting causes through interference with proper urinary drainage. Microphotographs, beautiful because of the manner in which the stains brought out the details, were shown, comparing normal and pathologic structures.

The paper was discussed by Doctors Hale and Beach, who, together with Doctor Isoard, thanked the speaker for his splendid presentation of the subject.

The report of the Board of Directors was read. Doctor MacDonald stated lodge practice violated at least five of the Principles of Medical Ethics as applied to contract practice, and presented the following resolution from the Board of Directors for action by the Society:

WHEREAS, Certain lodges, orders, and fraternal organizations provide medical services as an inducement to membership in these organizations and

WHEREAS, In the opinion of the Board of Directors of the Sacramento Society for Medical Improvement, the sale of such medical services through contracts with private physicians constitutes the practice of medicine; therefore be it

Resolved, That such practice of medicine by lodges, orders, and fraternal organizations be disapproved by the Board of Directors of the Sacramento Society for Medical Improvement; and be it further

Resolved, That the above resolution shall become effective only if it is endorsed by the majority of individual members at the next regular meeting of the Sacramento Society for Medical Improvement.

Doctor Reardan moved that the resolution be laid on the table. Seconded by Doctor Vance.

Discussion:

Doctor Teall asked, "Is this an ethical question or one of political politics? Will the Code of Ethics apply equally to violations by old-established men as well as by newer members of the Society?" He asked for a definite policy to guide the younger men.

Doctor Dozier asked for instructions as to how the Board of Directors should act in prosecuting violations of the Code of Medical Ethics.

Doctor Hale: This is an old and moot question which has been inherited from the past. This type of practice is unethical, but since we are divided on it, it should be laid on the table. If someone resigns, before night another doctor may seek the appointment or else an osteopath with an M. D. degree will take it or else new doctors may come in and take it. I recommend a gradual process to prevent new evils and in time to correct the old even as in correcting the county hospital situation here.

Doctor Lawson: I ask for consistency. We have disapproved the Mutual Benefit Health and Accident Association and approved the Intercoast Hospitalization Insurance Association. There is no justice in acting definitely regarding certain orders and tabling action against others in the same category.

Doctor Isoard: On account of agitation for State medicine, let the problem of lodge practice be undisturbed.

Doctor Reardan: A new member, in the past, once tried to gain admission to the Society, so he resigned his lodge connections and immediately a member of the Society took over the work.

Doctor Schoff: The Board of Directors have been zealous in enforcing the Code of Medical Ethics, for which they should be complimented. Harmony should prevail now because the action of the Sacramento Society for Medical Improvement, at the last meeting of the State Legislature, was chiefly responsible for defeating Senate Bill No. 454.

Upon putting the motion to a vote to table the matter, it carried—42 to 14.

The report of the delegates to the State meeting, by Doctor Hale, stated the delegation showed a definite trend to the right in dealing with economic problems and by their voting. State dues were fixed at \$15 by the House of Delegates.

The annual business meeting of the Sacramento Society for Medical Improvement was called to order by the president, Dr. Frank MacDonald, on December 15, 1936, at the Auditorium on Twenty-ninth and L streets. Thirty-seven members were present.

The financial and membership report of the secretary was read. A motion was made, and seconded, that the dues be \$20 for 1937. The motion was lost. A motion was made, and seconded, that dues be \$15; also was lost. A motion was made, and seconded, that the dues for 1937 be \$17.50. The motion was passed.

The following were elected as members on the Board of Directors for 1937: Wallerius, Schluter, Van Den Berg, Cook, Dozier, Ankele, Kanner, Christman, and Fanning.

Doctor MacDonald was unanimously elected to serve as delegate with Doctors Hale and Scatena for 1937. Doctor Pollock was elected to serve as alternate with Doctors Cook and Christman for 1937.

Dr. Glenn E. Millar was nominated and elected secretary-treasurer of the Sacramento Society for Medical Improvement.

NORRIS R. JONES, *Secretary*.

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PLACER-NEVADA-EL DORADO-SIERRA COUNTIES

The Placer County Medical Society met at the Freeman Hotel Saturday evening, January 9. The meeting was called to order by President C. E. Lewis at 8:15 o'clock. In addition to President Lewis, there were present the following members and visitors:

Members—Doctors E. E. Lundegaard, L. B. Barnes, Daniel L. Hirsch, Robert A. Peers, Ray C. Atkinson, Mildred E. Thoren, Max Dunievitz, W. A. Vinks, D. M. Kindopp, and C. C. Briner.

Visitors—Mr. W. F. Higby of San Francisco, executive secretary of the California Tuberculosis Association, and Miss Lu Crandall of Auburn, Public Health nurse.

This being a meeting devoted to the subject of tuberculosis control, the secretary, at the request of President Lewis, gave a short address on the essentials in the control of tuberculosis and discussed the proposed plan of the Placer County Tuberculosis Association's campaign for tuberculin-testing school children of Placer County.

The secretary introduced Mr. W. F. Higby, who gave a history of the antituberculosis movement in California since 1904 to date, outlining the various steps taken by the California Tuberculosis Association between these dates. Mr. Higby stated that it is the policy of the California Tuberculosis Association to work in cooperation with the various county medical societies. He outlined the tuberculin-testing programs which are being carried on in forty counties in California, always in cooperation with Organized Medicine.

Following Mr. Higby's address, a resolution of endorsement of the tuberculin-testing program of the Placer County Tuberculosis Association was adopted.

Doctors Atkinson and Briner exhibited a moving-picture film relating to childhood tuberculosis and tuberculin-testing.

The meeting then adjourned for refreshments.

ROBERT A. PEERS, *Secretary*.

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SAN BERNARDINO COUNTY

The meeting of the San Bernardino County Medical Society was held at the San Bernardino County Charity Hospital on Tuesday, December 1, 1936.

The meeting was called to order by the president at 8:15 p. m. About sixty members and guests were present.

A letter from Doctor Card was read and details regarding the joint meeting with the Riverside County Society on January 6 explained. The joint meeting for the officers of the California Medical Association will replace the regular meeting in January.

The program of the evening was given as a medical clinic by Dr. Phillip A. Corr of Riverside.

The following cases were presented and a short differential diagnosis given, preparatory to detailed discussion of treatment by Doctor Corr:

Diabetes Mellitus. Simple office management was stressed and protamine-insulin briefly discussed.

Pernicious Anemia. Various preparations used; cost and potency compared.

Pellagra. This case formed the basis of an excellent discussion of vitamins in general.

The cases were discussed by Dr. G. S. Landon of San Bernardino, Dr. Harold Gentry of Redlands, Dr. J. W. Neighbor of Arrowhead Springs, and was followed by a most enthusiastic and stimulating general discussion.

The meeting adjourned at 10:20 p. m., following which refreshments were served. A. E. VARDEN, *Secretary*.

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SAN MATEO COUNTY

The San Mateo County Medical Society met on December 23, 1936, in the banquet room of the Benjamin Franklin Hotel.

The guest speaker of the evening, Dr. Stanley Mentzer, presented a most illuminating discussion on the most recent advance in the diagnosis of gall-bladder disease, involving a new concept—obstructive cholecystitis. Doctor Mentzer's talk was illustrated with lantern slides, and was discussed by Dr. Carl Hoag and Dr. James Rinehart.

The secretary read a resolution pertaining to the attitude of the San Mateo County Medical Society concerning the corporate practice of medicine. A motion was made and seconded that the resolution be adopted in its entirety and was passed unanimously.

Dr. William Murphy read a letter that had been prepared by the Committee on County Affairs to be delivered to the Board of Supervisors of San Mateo County. Following the reading of the letter, a motion was made and seconded that the committee be empowered to submit the letter to the Board of Supervisors, with the approval of the San Mateo County Medical Society. This motion was passed unanimously.

Doctor Wade Macomber read a letter he had received from the United States Government concerning examination, vaccination, and typhoid inoculation of members of the Civilians' Military Training Camp, such medical service to be contributed by the physician. Dr. Frank Holmes Smith felt that the Civilians' Military Training Camp was a worthy cause, and agreed to take over the work for San Mateo County.

The chairman made an announcement concerning the nurses' fund for Mills Hospital and the San Mateo Community Hospital, following which a collection was taken. The collection amounted to \$40, and the secretary was directed to withdraw \$10 from the treasury as an additional contribution.

The secretary read a letter he had received from Dr. H. Henderson concerning her work in Daly City in regard to immunization and vaccination of school children. Following open discussion, the secretary was directed to write to Doctor Henderson, stating the facts in the case.

Dr. William Murphy, chairman of the Committee on Vaccination and Immunization of School Children, gave a report. The motion was seconded and carried to accept the report as read.

Dr. Carl Hoag, chairman of the Committee on Hospital Service Insurance, gave a report from his committee. The report was approved with recommendations concerning the policy of the San Mateo County Medical Society in connection with hospital service insurance in the coming year. Dr. Harold Hill made a motion that the committee continue to function and report to the Society as progress is made in the development of hospital insurance in the Bay counties. The motion was seconded, and carried.

A report was heard from Dr. William Knorp, chairman of the Public Health Committee. Doctor Knorp mentioned particularly the work that has been done and the program outlined by the San Mateo County Tuberculosis and Health Association. On motion, unanimously passed, the report was accepted.

The election of officers resulted as follows: Frank Gregory, president; Hartzell Ray, vice-president; J. Garwood Bridgman, secretary. Board of Directors—Olin M. Holmes, William Murphy, William Knorp, Erma Macomber, N. D. Morrison, Frank Gregory, and J. Garwood Bridgman. J. GARWOOD BRIDGMAN, *Secretary*.

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SANTA BARBARA COUNTY

The annual banquet meeting of the Santa Barbara County Medical Society was held at the El Paseo on Monday evening, January 11. Fifty-seven members and five guests were present.

At the conclusion of the dinner, Dr. P. A. Gray announced the results of the election of officers for the year: Irving Wills of Santa Barbara, president; Edward Lamb of Santa Barbara, president-elect; A. L. Mollath and Albert Missall, both of Santa Maria, vice-presidents-at-large; William H. Eaton of Santa Barbara, secretary-treasurer. Council—Hugh Freidell and H. E. Henderson, both of Santa Barbara, and O. C. Jones of Santa Maria.

Amendments to the Society's by-laws were given their last reading, and were unanimously adopted.

Amendments to the Society's constitution were given their second reading, and were ordered held for their final reading and adoption at the February meeting.

Retiring President Gray reviewed briefly the work of the Council for the past year, complimenting the members upon their accomplishments; and he also expressed his appreciation and thanks to the members of the various committees for their splendid coöperation and services. He then introduced Dr. Irving Wills, the newly elected president.

Following a few introductory remarks, President Wills introduced the speaker of the evening, Dr. Alice Solomon of Berlin, Germany. Doctor Solomon's life work has been social service, and she gave an extremely interesting and instructive talk upon the social service work in France, England, and Germany, commenting on comparisons, and stressing the importance of this work in the future development of the human race. At the conclusion of the talk she answered pertinent questions, which brought to an end a very enjoyable evening.

WILLIAM H. EATON, *Secretary*.

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TULARE COUNTY

The regular December meeting of the Tulare County Medical Society was held, by invitation, with the Tulare-Kings Dental Association. A dinner at Motley's Café preceded the joint meeting.

The guest speaker of the evening was Dr. Herman Becks of the University of California. He presented the subject of *Bone Pathology or Biology in Relation to Dental Medicine*, profusely illustrating the talk with lantern slides and also showing a set of typical x-ray reproductions that are being used as a basis for diagnostic comparisons.

KARL F. WEISS, *Secretary*.

CHANGES IN MEMBERSHIP

New Members (18)

Alameda County.—Philip N. Baxter, Chelsea D. Eaton, George E. Koerber, Robert F. Legge, E. B. Leland, Floyd D. Lewis, Camille Mermod, Kenneth A. Nielson, William Henry Probert, Robert L. Redfield, Amy N. Stannard.

San Bernardino County.—Kenneth Harvey Abbott, Francis L. Crowley, Emmett Forde Kesling.

San Francisco County.—Reuben Herman Zumwalt.

San Joaquin County.—John T. Heavey.

Santa Cruz County.—Gordon Bunney, William Lawrence Young.

Transferred (1)

Leslie J. Seeley, from Siskiyou County to Shasta County.

In Memoriam

Green, Louis David. Died at San Francisco, January 14, 1937, age 55. Graduate of Denver and Gross Medical College, 1909, and licensed in California the same year. Doctor Green was a member of the San Francisco County Medical Society, the California Medical Association, and a Fellow of the American Medical Association.

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Moffitt, Thomas William. Died at Hollywood, January 4, 1937, age 67. Graduate of Starling Medical College, Columbus, Ohio, 1893. Licensed in California in 1923. Doctor Moffitt was a member of the Los Angeles County Medical Association, the California Medical Association, and the American Medical Association.

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O'Connor, Thomas Charles, Jr. Died at Lodi, January 13, 1937, age 44. Graduate of the University of California Medical School, San Francisco, 1927, and licensed in California the same year. Doctor O'Connor was a member of the San Joaquin County Medical Society, the California Medical Association, and a Fellow of the American Medical Association.

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Wagner, Henry Lewis. Died at San Francisco, December 27, 1936, age 77. Graduate of the Julius Maximilian Universität, Würzburg, Bavaria, 1884. Licensed in California in 1887. Doctor Wagner was a retired member of the San Francisco County Medical Society, the California Medical Association, and the American Medical Association.

THE WOMAN'S AUXILIARY TO THE CALIFORNIA MEDICAL ASSOCIATION†

Component Auxiliaries

Los Angeles County

A Christmas program featured the luncheon of the Woman's Auxiliary to the Los Angeles County Medical Association on December 22 at the County Medical building. Only about fifty members were present, but it was one of the most delightful meetings of the year. The choir boys from St. Thomas' Episcopal Church gave a beautiful selection of Christmas music, and the table decorations were particularly festive and attractive.

It was announced that \$26 had been made at the recent party given by Mrs. Joe Zeiler in her own home, which sum will be used for circulating health plays among the schools.

Dr. Harlan Shoemaker announced plans for President Roosevelt's birthday ball, being sponsored by the County Medical Society, and asked the coöperation of the Auxiliary.

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Fresno County

On December 1 the Fresno Auxiliary to the California Medical Association held a card party in place of the regular meeting. The purpose of this party was to obtain funds to purchase subscriptions to *Hygeia*.

We are happy to report we were successful in obtaining fifty-five subscriptions. Thirty-five of these are pri-

†As county auxiliaries of the Woman's Auxiliary to the California Medical Association are formed, the names of their officers should be forwarded to Mrs. Robert M. Furlong, chairman of the Publicity and Publications Committee, Linden Lane, San Rafael. Brief reports of county auxiliary meetings will be welcomed by Mrs. Furlong and must be sent to her before publication takes place in this column. For lists of state and county officers, see advertising page 6. The Council of the California Medical Association has instructed the editor to allocate two pages in every issue for Woman's Auxiliary notes.

vate and twenty are to be placed around in the community in such places as large beauty parlors, three high schools, the State College, County Library and its branches.

Fifty persons attended the party, which was a very enjoyable affair.

MRS. KENNETH J. STANIFORD.

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San Diego County

The regular luncheon meeting of the Auxiliary to the San Diego County Medical Society was held December 8, 1936, at the University Club. The president, Mrs. F. G. Lindemulder, conducted the meeting.

It was announced that the Medical Society Bulletin has given one full page for our use. Mrs. R. Emerson Bond will be editor for this page.

Posters are to be given to every member of the Auxiliary for use in the doctors' offices. The posters will tell of the radio programs sponsored by the American Medical Association.

Mrs. E. H. Christopherson announced work of the public relations group. Mrs. Elmo Crabtree held a quiz on *Hygeia*, with a review of the value of the magazine.

Members of the Auxiliary presented a play, "A Doctor's Christmas," written by Mrs. Mark Glaser, State Chairman of Hygeia.

ELIZABETH R. BOLFORD.

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San Francisco County

The monthly meeting of the round table on *Causes and Cure of War* was held on Wednesday, January 6, at the County Medical Society building, under the leadership of Mrs. Fred H. Zumwalt. Dr. E. Guy Talbot, western secretary of the National Council for Prevention of War, gave a very enlightening and stimulating talk on *Can We Keep Out of War?* He answered that question by first showing the ever-growing trend toward a European war, with the United States involved. Dictatorships, the scrapping of treaties, and the armament race, combined with the Spanish and Japanese situations, are bringing us nearer to a general conflagration.

Doctor Talbot stated that the causes of war are political, economic, and psychological, and that at the present time certain newspapers and magazines are building up an emotion of hatred, which was a great factor in the Spanish-American and World wars.

There are three important bills before Congress now that, if passed, would be a factor in the prevention of involving the United States in war. First, the bill to nationalize the munitions industry, that is, control by the Government. Second, to take the profits out of war, which is a bill presented by the Nye Investigation Committee. This committee found that for every three men killed in the World War, one millionaire was made. And third, a bill to strengthen the neutrality legislation. At present our neutrality bill expires in May, and it applies only to the embargo on implements of war. Doctor Talbot thought that it should also apply to raw materials, as oil, cotton, etc.

To close his talk, Doctor Talbot quoted a small line from Admiral Sims' article in *Freedom of the Seas*, which holds the kernel of the situation:

"... a decent regard of humanity should be placed ahead of gold."

MRS. EDWARD M. LIPSETT.

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Santa Clara County

A luncheon was given by the Woman's Auxiliary to the Santa Clara County Medical Society on Monday, January 4, at the Hotel De Anza.

Dr. Dorothy Hazeltine Yates, assistant professor of psychology at San Jose State College, was guest speaker, her subject being *Psychology in Everyday Practice*.

Opposition to Forced Retirement Law for Physicians.—In a recent letter it was stated that a bill, termed the "Pomaret law," had been introduced in the French legislature according to which the members of all professions will be obliged to surrender their diplomas at the age of sixty-five and discontinue their work without any recompense in the form of a pension from the state. Violent opposition to such a proposal is appearing from all sides, and a medical journalist said that he would be eligible for retirement in three months and then either be ready for the soup line by 1939 or be obliged, like so many unemployed here in Paris, to earn a living by singing in the streets. Maurice Mordagne, the leader of the medical students' union, quotes such a letter received by him, in an article in the August 22 *Press médicale*, which reflects the reaction of the professors and medical journalists on the forced retirement bill. As to the faculties, Professor Villard of Montpellier is quoted as saying that the medical profession in France does not seem to have awakened to the potential dangers of such a bill if passed. Many physicians would be obliged either to die of hunger or seek asylum in a charitable institution. Another professor of the Paris Medical School who is familiar with conditions in smaller communities states that the applications of such a law would give temporary relief in an overcrowded profession only if some measures were adopted to reduce materially the numbers of licenses to practice granted annually. Professor Sergeant stated that every effort must be made to fight against the dangers of state medicine, which threatens to reestablish the serfdom suppressed by the French Revolution.

The proposed law would affect not only members of the technical (physicians, dentists, architects, engineers) but also those of non-technical professions (teachers in liberal arts); hence Professor Fedel of one of the high schools is quoted as saying that many discoveries have been made by men and women above the age of sixty-five. The campaign to retire such individuals without pension at that age is being led by ignorant opportunists and recently naturalized foreigners. Why not apply such a law to holders of public offices, many of whom have rendered the state invaluable service after the age of sixty-five? Many physicians even at seventy are still active and in possession of all their faculties, thus rendering indispensable aid by their advice, gained through many years of experience, to younger colleagues. Professor Faure, gynecologist, cited instance after instance of men of seventy or over who were a contradiction of the statement made by the supporters of the bill that a surgeon ought not to operate after the age of sixty-five.

The syndicat (union) of physicians in the department of the Seine has recently studied the records of one hundred foreign students and physicians during a period of four months and found that the majority of those who applied for naturalization and permission to practice were granted these demands by the government. It would appear more necessary to subject such applications to a stricter control than to try to force retirement of older men. The latter, if the bill passes the legislature, would not help young graduates born in France or its colonies as much as it would the recent influx of foreigners.—*J. A. M. A.*

Congress of Physical Therapy, X-Ray, and Radium.

The second cruise of the Latin-American Congress of Physical Therapy, X-Ray, and Radium will take place March 9 to 28, to Guatemala City, Guatemala. One boat will sail from Philadelphia March 9, and another from New Orleans March 10. The congress has been arranged for the week of the inauguration of the president of Guatemala, and visitors will participate in the festivities at that time. There will be three scientific sessions—Tuesday morning and afternoon, March 16, and Saturday morning, March 20—at the National University School of Medicine, the intervening time to be spent in a trip to the interior of Guatemala. Physicians who wish to attend should apply to Dr. Norman E. Titus, 730 Fifth Avenue, New York, president of the congress, or to Dr. Cassius Lopez de Victoria, 1013 Lexington Avenue, executive director.